



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 10 LABORATORY
7411 Beach Dr. East
Port Orchard, Washington 98366

SOP Excursion Approval Form

In order to comply with the NELAC Institute Environmental Laboratory Standard, the EPA Region 10 Laboratory at Port Orchard is required to obtain approval from its clients to perform any procedure that differs from those prescribed in the Laboratory's current Standard Operating Procedures (SOPs) or test methods.

The Laboratory's SOPs describe in detail the usual processes by which a sample is prepared and analyzed in order to meet typical project objectives. However, it is sometimes advantageous or necessary to tailor the analytical process, based on the sample matrix, the analytes of concern, or the specific project objectives. The need for these changes might not be anticipated until the samples have arrived at the Laboratory or analyses have revealed analytical complications.

It is the Laboratory's policy to document any excursions from the SOPs, to technically justify the excursions, and to ensure that the excursions are authorized by the appropriate personnel. Although all excursions will be reported to the client in the Data Review memorandum, in order to meet sample and extract holding times, the Laboratory is seeking the client's prior approval of all excursions deemed necessary by the analyst. This approach will also help to ensure timely analytical results. The analyst is responsible for consulting with the client in cases where the excursion is expected to have a significant impact on the data or affect regulatory compliance determinations. Please complete this document to indicate your preference prior to submitting samples to the Laboratory.

☐ The analysts at the EPA Region 10 Laboratory may make excursions from the analytical SOPs or test methods based on their best professional judgment without first consulting me, the client. I understand that I will be informed of these changes in the Data Review memo that accompanies the data and that the changes will be documented, technically justified, and authorized by the appropriate Laboratory personnel. I also understand that the analyst is responsible for consulting with me prior to the excursion in cases where the excursion is expected to have a significant impact on the data or affect regulatory compliance determinations.

☐ The analysts at the EPA Region 10 Laboratory may not make excursions from the analytical SOPs or test methods without first consulting me, the client. I am providing the contact information for me and my designated alternate(s) as listed below should an excursion be deemed appropriate by the analysts. I also understand that the delivery of the analytical data may be delayed, or that the holding time for some analytes may be exceeded, in cases where Laboratory personnel are unable to contact me or my alternate(s) in a timely fashion.

Name:
email:
Office Phone:
Cell Phone:
Home Phone:
Other:

Alternate's Name:
email:
Office Phone:
Cell Phone:
Home Phone:
Other:

Project Name: _____

Project Code: _____

Signature: _____

Date: _____